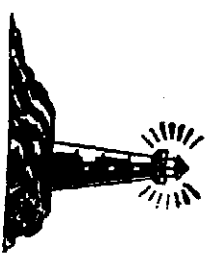




Town of Hull



BOARD OF SELECTMEN

GHULLO

MUNICIPAL BUILDING
HULL, MASSACHUSETTS 02045
(617) 925-2000

CORI REQUEST FORM

The Town of Hull has been certified by the Criminal History Systems Board for access to conviction data. As an applicant for

APPLICANT/EMPLOYEE INFORMATION (PLEASE PRINT)

I understand that a criminal record check will be conducted for conviction and pending criminal case information only and that it will not necessarily disqualify me. The information below is correct to the best of my knowledge.

Applicant Signature

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____

MAIDEN NAME OR ALIAS (IF APPLICABLE) _____ PLACE OF BIRTH _____

DATE OF BIRTH _____ SOCIAL SECURITY NO _____ MOTHERS MAIDEN NAME _____

FORMER ADDRESSES: _____

SEX: _____ HEIGHT: _____ ft. _____ in. WEIGHT: _____ EYE COLOR: _____

STATE DRIVER'S LICENSE NUMBER: _____

***THE ABOVE INFORMATION WAS VERIFIED BY REVIEWING THE FOLLOWING FORM OF GOVERNMENT ISSUED PHOTOGRAPHIC IDENTIFICATION: _____

REQUESTED BY: _____
SIGNATURE OF CORI AUTHORIZED EMPLOYEE _____